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Application Number	10/768,373-Conf. #6529			
Filling Date	January 30, 2004			
First Named Inventor	Thomas Hezel			
Art Unit	3752			
Examiner Name	V. A. Johnson			
Attorney Docket Number	66835-0003			

I hereby revoke all previous powers of attorney given in the above-identified application.						
A Power of Attorney is submitted herewith. OR X I hereby appoint the practitioners associated with the Customer Number: 10291						
X Please change the correspondence address for the above-identified application to:						
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I am the: Applicant/Inventor. X Assignee of record of the entire interest. See 37 CFR 3.71, Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)						
SIGNATURE of Applicant or Assignee of Record						
Signature Les Mesen, L						
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Date	11/27/07			Telephone	(2	248) 745-8500
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.						
*Total of 1 forms are submitted.						

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Dated: 12-10-07	Signature: MWX UD- XXX	(Michael B. Stewart)				